

FAMILY AND SOCIAL HISTORY

Name of child: _____ Date of Birth: _____

Mother (or Guardian): _____ Age: _____

Father (or Guardian) : _____ Age: _____

Marital Status of Parents:

Parents together: _____

Separated (how long?): _____ Divorced(how long?): _____

If child is adopted, age at adoption _____ Does child know about adoption? _____

Custody/visiting arrangements: _____

Stepmother? _____ Stepfather? _____

Brothers and Sisters of Child:

Name: _____ DOB: _____ Grade in school: _____

Name: _____ DOB: _____ Grade in school: _____

Name: _____ DOB: _____ Grade in school: _____

Other members of the household:(include relationship and age)

If both parents are away from home during the day, please state arrangements for child's care when he is not at school.: _____

Does child have a room alone?: _____ If not, with whom? _____

Who has cared for child other than his parents?(state whether adults or teen-ager):

Has child had group play experience? _____ Where?: _____

Does child have neighborhood playmates? _____

When and with whom does child watch TV? _____

DEVELOPMENTAL HISTORY OF CHILD (under 6 years of age).

Age at which child: Crawled _____ Sat alone _____ Walked _____

Named simple objects _____ Repeated short sentences _____

Slept through the night _____ Began toilet training _____

Word child uses for: Urination _____ Bowel movement _____

Usual time for B.M. _____

Does child dress self? _____ Undress self? _____

Is child's dominate side right or left? _____

What time does child usually eat breakfast? _____ lunch? _____ dinner? _____

Any dietary restrictions? _____

What time does child usually go to bed at night? _____ Awaken? _____

Does he sleep well? _____

What are child's favorite Indoor play activities? _____

Outdoor play activities? _____
